

DARIEN HARBOR MOORING SPACE APPLICATION/APPROVAL FORM

9/97

RENEWALS ARE DUE BY MAY 1ST. OF EACH YEAR

NAME _____ DATE NOW _____

STREET _____ HOME PHONE _____

CITY, STATE, ZIP _____ WORK PHONE _____

RENEWAL APPLICATION () NEW APPLICATION () RELOCATION WANTED ()

INDICATION APPROXIMATE LOCATION ON DRAWING BELOW: SQUARE LETTER _____

TYPE OF BOAT - POWER: OPEN () CABIN () SAIL: CENTERED () KEEL ()

YEAR BUILT & MAKE _____ MODEL _____ POWER _____

LENGTH OVERALL _____ DRAFT _____ COLOR _____

BOAT NAME _____ REGISTRATION # _____

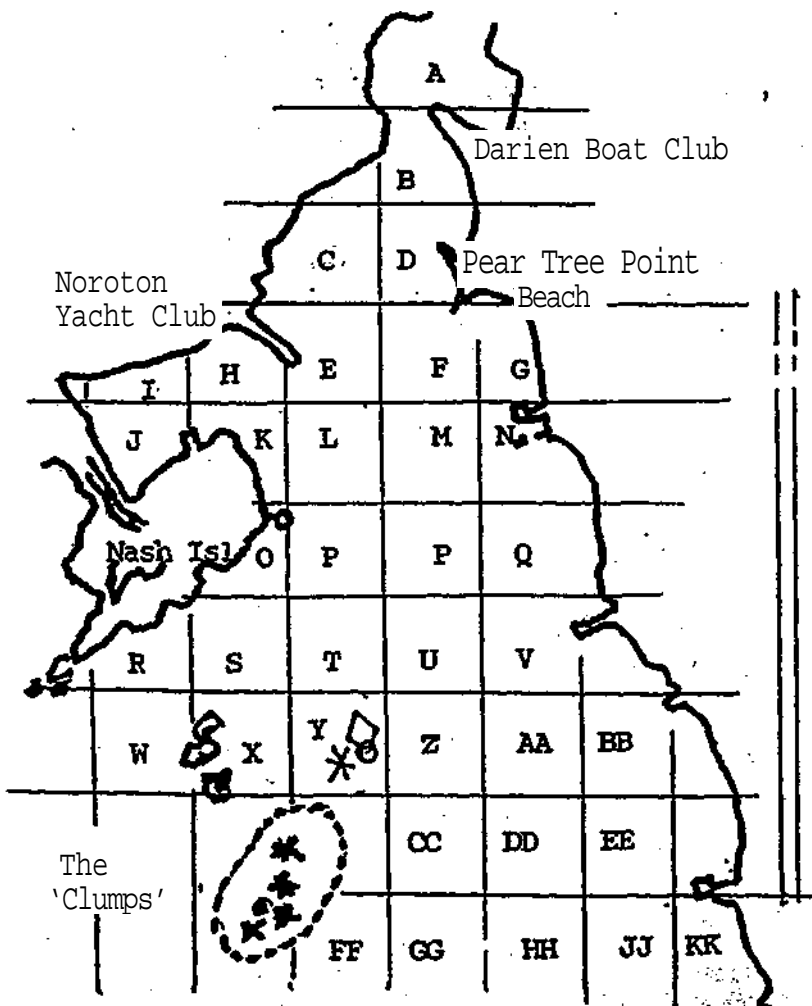
DOCUMENTED - STATE _____ DOCUMENTATION # _____

RENEWAL & RELOCATION APPLICANTS MUST COMPLETE THE FOLLOWING:

MOORED: BOW ONLY () BOW & STERN () WEIGHT OF PRIME ANCHOR _____ LBS

CHAIN SIZE _____ INCHES CHAIN LENGTH _____ FT DATE PLACED _____

DATE ANCHOR RAISED & INSPECTED LAST _____ INSPECTOR _____



ALL APPLICANTS: I DECLARE THAT THE INFORMATION FURNISHED HEREON IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND RELIEF, AND THAT I AGREE TO COMPLY WITH ALL REGULATIONS GOVERNING MOORINGS WITHIN ALL WATERS OF DARIEN. THAT I INTEND TO USE THIS MOORING SPACE FOR THE BOAT DESIGNATED DURING THE MAJOR PART OF THE SEASON. FURTHER, I UNDERSTAND THAT I AM COMPLETELY RESPONSIBLE FOR THE SAFETY* OPERATION AND MAINTENANCE Or MY MOORING TACKLE AND THAT I WOULD BE RESPONSIBLE FOR DAMAGES CAUSED BY FAILURE OF MY MOORING TACKLE.

SIGNED:

APPLICANT

APPROVED:

HARBOR MASTER - DEPUTY HARBOR MASTER.

PLEASE COMPLETE FORM AND RETURN TO:

ROBERT P. PRICE, HARBOR MASTER
33 CHASMARS POND RD
DARIEN, CT 06820